BEFORE THE DIVISION OF MEDICAL QUALITY MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:)	Case No. 04-2003-148886
NEIL HOLLANDER, M.D.)	
Physician's and Surgeon's Certificate #G 18418)	
Respondent.))	

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby accepted and adopted as the Decision and Order by the Division of Medical Quality of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on August 15, 2007.

IT IS SO ORDERED July 16, 2007

MEDICAL BOARD OF CALIFORNIA

Cesar A. Aristeiguieta M.D., F.A.C.E.P.

Chair, Panel A

Division of Medical Quality

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1	EDMUND G. BROWN JR., Attorney General		
2	of the State of California THOMAS S. LAZAR		
3	Supervising Deputy Attorney General SAMUEL K. HAMMOND, State Bar No. 141135		
4	Deputy Attorney General		
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8	Attorneys for Complainant		
9		PITTE	
10	BEFORE THE DIVISION OF MEDICAL QUALITY		
11	MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS		
12	STATE OF CAL	IFORNIA	
13	In the Matter of the Accusation Against:	Case No. 04-2003-148886	
14	NEIL HOLLANDER, M.D. 8888 Lauderdale Court, #216H	OAH No. L-2005120210	
15	Huntington Beach, CA 92646	STIPULATED SETTLEMENT AND DISCIPLINARY ORDER	
16	Physician's and Surgeon's Certificate		
17	No. G18418		
18	Respondent.	·	
19	·		
20	IT IS HEREBY STIPLIL ATED AND	AGREED by and between the parties	
21	IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-entitled proceedings that the following matters are true:		
22			
23	PARTIES 1 Devid T. Thornton (Complainant) is the Evecutive Director of the		
24	1. David T. Thornton (Complainant) is the Executive Director of the		
	Medical Board of California. He brought this action solely in his official capacity and is		
25	represented in this matter by Edmund G. Brown Jr., Attorney General of the State of		
26	California, by Samuel K. Hammond, Deputy Attorney General.		
27	<i>///.</i>		
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2. Respondent Neil Hollander, M.D. (Respondent) is represented in this proceeding by attorney Richard Moss, Esq., whose address is 255 South Marengo Avenue, Pasadena, California 91101-2719.

3. On or about June 10, 1970, the Medical Board of California issued Physician's and Surgeon's Certificate No. G18418 to Neil Hollander, M.D. The Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 04-2003-148886 and will expire on July 31, 2008 unless renewed. On December 17, 2003, the Division of Medical Quality, Medical Board of California, Department of Consumer Affairs, State of California ("Division") issued its Decision and Order in Case No. 18-2001-118989. The Decision and Order, which became effective on January 16, 2004, placed respondent's license on three (3) years probation under specified terms and conditions. By operation of the terms of that Decision and Order, respondent's probation has run and is extended until matter the of Accusation No. 04-2003-148886 is final.

JURISDICTION

4. Accusation No. 04-2003-148886 was filed before the Division, and is currently pending against respondent. A true and correct copy of the Accusation and all other statutorily required documents were properly served on respondent on July 11, 2005. Respondent timely filed his Notice of Defense contesting the Accusation. A true and correct copy of Accusation No. 04-2003-148886 is attached as Exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

- 5. Respondent has carefully read, discussed with counsel, and fully understands the charges and allegations in Accusation No. 04-2003-148886. Respondent has also carefully read, discussed with counsel, and fully understands the effects of this Stipulated Settlement and Disciplinary Order.
- 6. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on

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his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

8. Respondent does not contest that, at an administrative hearing, complainant could establish a prima facia case with respect to the charges and allegations in Accusation No. No. 04-2003-148886 and that, he has thereby subjected his Physician's and Surgeon's Certificate No. A G18418 to disciplinary action. Respondent agrees to be bound by the Division's imposition of discipline as set forth in the Disciplinary Order below.

CONTINGENCY

- 9. The parties agree that this Stipulated Settlement and Disciplinary Order shall be submitted to the Division for its consideration in the above-entitled matter and, further, that the Division shall have a reasonable period of time in which to consider and act on this Stipulated Settlement and Disciplinary Order after receiving it.
- 10. The parties agree that this Stipulated Settlement and Disciplinary Order shall be null and void and not binding upon the parties unless approved and adopted by the Division, except for this paragraph, which shall remain in full force and effect. Respondent fully understands and agrees that in deciding whether or not to approve and adopt this Stipulated Settlement and Disciplinary Order, the Division may receive oral and written communications from its staff and/or the Attorney General's office. Communications pursuant to this paragraph shall not disqualify the Division, any member thereof, and/or any other person from future participation in this or any other matter affecting or involving respondent. In the event that the Division, in its discretion, does not approve and adopt this Stipulated Settlement and Disciplinary

Order, with the exception of this paragraph, it shall not become effective, shall be of no evidentiary value whatsoever, and shall not be relied upon or introduced in any disciplinary action by either party hereto. Respondent further agrees that should the Division reject this Stipulated Settlement and Disciplinary Order for any reason, respondent will assert no claim that the Division, or any member thereof, was prejudiced by its/his/her review, discussion and/or consideration of this Stipulated Settlement and Disciplinary Order or of

any matter or matters related hereto.

ADDITIONAL PROVISIONS

9 11. This Stipulated Settlement and Disciplinary Order is intended by the 10 parties herein to be an integrated writing representing the complete, final and exclusive 11 embodiment of the agreements of the parties in the above-entitled matter.

- 12. The parties understand and agree that facsimile copies of this Stipulated Settlement and Disciplinary Order, including facsimile signatures thereto, shall have the same force and effect as the originals.
- 13. In consideration of the foregoing admissions and stipulations, the parties agree the Division may, without further notice to or opportunity to be heard by respondent, issue and enter the following Decision and Disciplinary Order:

DISCIPLINARY ORDER

respondent Neil Hollander, M.D. in Case No 18-2001-118989, is extended for an additional two (2) years from the original date probation was to have expired pursuant to Division's Decision and Order in Case No 18-2001-118989 which became effective January 16, 2004. Probation Conditions No. 4 through 18 in the Division's Decision in Case No. 18-2001-118989 shall remain in full force and effect until respondent's extended probation period is completed.

Within 15 days of the effective date of this Decision respondent shall provide the Division, or its designee, proof of service that respondent has served a true copy of the Decision and Accusation to the Chief of Staff or Chief Executive Officer at

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every hospital where privileges or membership are extended to respondent, at any hospital where respondent engages in the practice of medicine, including all physician and locum tenens registries or other similar agencies, and to the Chief Executive Officer at every insurance carrier which extends malpractice insurance coverage to respondent.

ACCEPTANCE

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, Richard Moss, Esq. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate No. 618418. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Division of Medical Quality, Medical Board of California, Department of Consumer Affairs, State of California.

DATED: __ 05/04/2007

NEIL HOLLANDER, M.D. Respondent

I have read and fully discussed with respondent Neil Hollander, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and

Disciplinary Order. I approve its form and content.

DATED: 05/16/07

RICHARD MOSS, ESQ. Attorney for Respondent

ENDORSEMENT The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Division of Medical Quality, Medical Board of California, Department of Consumer Affairs, State of California. June 6 2007 DATED: EDMUND G. BROWN JR., Attorney General of the State of California THOMAS S. LAZAR Supervising Deputy Attorney General Deputy Attorney General Attorneys for Complainant DOJ Matter ID: SD2005700700 Hollander.stip.wpd

Exhibit A Accusation No. 04-2003-148886

FILED STATE OF CALIFORNIA MEDICAL BOARD OF CALIFORNIA BILL LOCKYER, Attorney General SACRAMENTO Sully of the State of California D. KENNETH BAUMGARTEN, State Bar No. 124371 Deputy Attorney General California Department of Justice 3 110 West "A" Street, Suite 1100 San Diego, California 92101 P.O. Box 85266 San Diego, California 92186-5266 5 Telephone: (619) 645-2195 Facsimile: (619) 645-2061 6 Attorneys for Complainant 8 9 BEFORE THE DIVISION OF MEDICAL QUALITY MEDICAL BOARD OF CALIFORNIA 10 DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA 11 In the Matter of the Accusation Against: Case No. 04-2003-148886 12 NEIL HOLLANDER, M.D. ACCUSATION 13 8888 Lauderdale Court, # 216H Huntington Beach, CA 92648 (Cal. Gov. Code, § 11503.) 14 Physician's and Surgeon's 15 Certificate No. G 18418 16 Respondent. 17 Complainant David T. Thornton, as causes for disciplinary action, alleges: 18 19 **PARTIES** Complainant is the Executive Director of the Medical Board of California, 1. 20 Department of Consumer Affairs, State of California (hereinafter the "Board"), and makes and 21 files this Accusation solely in his official capacity. 22 2. At all times mentioned herein, Neil Hollander, M.D., (hereinafter 23 "Respondent") has been licensed by the Board under Physician's and Surgeon's Certificate 24 G 18418. Said certificate was issued by the Board on June 10, 1970, and will expire on July 31, 25 2006, unless renewed. 26 111 27 28 111

JURISDICTION

- 3. This Accusation is brought before the Division of Medical Quality ("Division") of the Medical Board of California under the authority of the following laws. 1/2
- 4. Section 2227 of the Code provides that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, or such other action taken in relation to discipline as the Division deems proper.
- 5. Section 2234 of the Code provides that the Division of Medical Quality shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:
 - "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter [Chapter 5, the Medical Practice Act].
 - "(b) Gross negligence.
 - "(c) Repeated negligent acts.
 - "(d) Incompetence.
 - "(e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon.
 - "(f) Any action or conduct which would have warranted the denial of a certificate.

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6. Unprofessional conduct under California Business and Professions Code section 2234 is conduct which breaches the rules or ethical code of the medical profession, or

1. All section references are to the California Business and Professions Code ("Code") unless otherwise indicated.

conduct which is unbecoming to a member in good standing of the medical profession, and which demonstrates an unfitness to practice medicine.²/

- 7. Section 2266 of the Code provides that the failure of the physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients constitutes unprofessional conduct.
- 8. Section 125.3 of the Code provides, in pertinent part, that in any order issued in resolution of a disciplinary proceeding, a board may request that the administrative law judge direct a licensee found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case, including charges imposed by the Attorney General. Under section 125.3, subdivision (c), a certified copy of the actual costs or a good faith estimate of costs where actual costs are not available, including investigative and enforcement costs, and charges imposed by the Attorney General, up to the date of the hearing, signed by the designated representative of the entity bringing the proceeding shall be *prima facie* evidence of the reasonable costs of investigation and prosecution of the case.
- 9. Section 14124.12 of the Welfare and Institutions Code provides, in pertinent part, that:
 - "(a) Upon receipt of written notice from the Medical Board of California, the Osteopathic Medical Board of California, or the Board of Dental Examiners of California, that a licensee's license has been placed on probation as a result of a disciplinary action, the Department may not reimburse any Medi-Cal claim for the type of surgical service or invasive procedure that gave rise to the probation, including any dental surgery or invasive procedure, that was performed by the licensee on or after the effective date of probation and until the termination of all probationary terms and conditions or until the probationary period has ended, whichever occurs first. This section shall apply except in any case in

^{2.} Shea v. Board of Medical Quality Assurance (1978) 81 Cal. App. 3d 564, 575.

which the relevant licensing board determines that compelling circumstances warrant the continued reimbursement during the probationary period of any Medi-Cal claim, including any claim for dental services, as so described. In such a case, the Department shall continue to reimburse the licensee for all procedures, except for those invasive or surgical procedures for which the licensee was placed on probation."

FIRST CAUSE FOR DISCIPLINARY ACTION

(Gross Negligence)

- 10. Respondent has subjected his Physician's and Surgeon's Certificate No. G 18418 to disciplinary action under sections 2227 and 2234(b) of the Code, in that he has committed gross negligence in his care and treatment of patient S.V. The circumstances are as follows:
 - A. Respondent was one of the primary care physicians for patient S.V., a male infant born October 30, 1997. During 1998 and 1999, the relevant time periods of this action, Respondent was a contract physician working with another physician identified as Dr. H.W. During this time period, Respondent provided medical care to patient S.V.
 - B. According to the parents of patient S.V., Juan and Juana R., it was their observation that their son's development began to regress when he was about a year and three months old. They reported these concerns to Respondent and Dr. H.W. during medical visits. They also requested authorization to see a specialist for their son, but neither Respondent, nor Dr. H.W., would authorized such a referral at the time.
 - C. According to S.V.'s parents, some time in late 1999, Respondent and/or Dr. H.W. finally agreed to give them an authorization to see a specialist. However, when S.V.'s father went to Respondent's office for the referral, he was reportedly informed that such a referral could not be made, that their son was fine and their insurance was a problem. S.V.'s father was advised to contact his insurance company, which he subsequently did, and was told the referral authorization needed to be done by

his primary physician, which was Respondent and/or Dr. H.W. Reportedly, the representative from the parents' insurance company suggested changing to a different primary care physician.

- D. During the time S.V. was being seen in Respondent's medical offices, whether by Respondent or Dr. H.W., the parents were repeatedly told their son was "fine", despite the parents' reports that S.V. was having trouble with his feet and difficulty walking and could no longer keep his balance. The parents requested their son be given x-rays or an MRI, but were told such tests were not necessary. Instead, they were given antibiotics for J.V.'s ear infections.
- E. During October and November of 1999, the parents reported their son's equilibrium was getting very bad. They renewed their requests that J.V. be given x-rays and an MRI, but such tests were not ordered. They also renewed their requests that their son be referred to a specialist. Reportedly, Respondent and/or Dr. H.W. told the parents there was no time to do such a referral and besides, the boy was well. According to the parents, neither Respondent, nor Dr. H.W., ever mentioned a referral to a Regional Center for evaluation of their sons walking and balance problems and that they were never given a referral to such a Regional Center.
- F. S.V.'s parents clearly communicated to Respondent and Dr. H.W. repeatedly and with consistency, a series of progressive symptoms and signs of neurodevelopmental regression starting when S.V. was around 15 months of age. The primary concern they expressed to Respondent and Dr. H.W. was the problems with S.V.'s gait. Both parents reported progressive problems with what they refer to as his "equilibrium". They specifically referred to him having an increasingly unsteady, wide, and, ultimately, a "waddling" gait. This is a description of ataxia, which is a neurological finding of conditions that damage the cerebellum. This should have been of particular concern to Respondent and Dr. H.W. given the fact that S.V. was noted to walk normally at 12 months.

G. In addition to their reported observations and concerns about their son's gait, the parents also reported progressive problems noticed between August 1999 and October 1999 with S.V.'s "handling" and, ultimately, his inability to pick-up toys. They also reported during this time period he was also having a difficult time holding his head up, had regression of speech, and was becoming depressed and withdrawn. He also started vomiting in November 1999.

- H. S.V.'s parents eventually took him to other physicians, including a pediatric neurologist, for evaluation of his worsening symptoms. Following appropriate tests, including a head MRI on or about March 30, 2000, S.V. was found to have a brain tumor in the area of the cerebellum. He was admitted to Children's Hospital of Orange County for neurosurgical evaluation and an excision of the brain tumor was subsequently completed. S.V. did experience residual impairment as a result of this tumor and its removal.
- I. Following initiation of malpractice litigation by the parents of S.V. against Respondent and Dr. H.W., Respondent made changes to the patient's medical records and has made a variety of explanations for doing so.
- 11. Respondent committed gross negligence in his care and treatment of patient S.V., which included, but was not limited to, the following:
 - A. Respondent's entire management of patient S.V. was an extreme departure from the generally accepted pediatric standards of care for the following reasons:
 - 1. Individual chart notes do not distinguish between sick visits and well child care.
 - 2. Aged based chart note templates do match chronological age of the patient on many of the visits.
 - 3. There is no growth chart. A review of growth parameters that were charted reveal wildly inconsistent measurements that should have been reviewed and reassessed.

- 4. There is no problem list in the chart.
- 5. There is no reference made to immunization status in the well visit notes, although there is a record of the immunization card itself.
- 6. Chart notes do not adequately document follow-up advice and arrangements for either diagnoses made, problems addressed, or for future well care.
- 7. On one visit, March 1, 1999, there is neither a treatment plan nor follow-up plan documented. Temperature is also not documented on this illness visit.
- 8. On the visits of July 13 and 28, 1998 and November 23, 1999, "Growth & Development" and "Education [Preventative Care]" prompt boxes are marked. These visits appear to be illness visits. However, the elements that constitute a Well Child Visit are absent. On the later two visits, the prompts are age-inappropriate based on the discrepancy in the patient's age and the age-based form used.
- 9. Although all but one visit were for respiratory illness, respiratory rate is rarely recorded. Moreover, reported symptoms and exam findings often do not support the diagnosis made.
- 10. On a number of visits, a pulmoaide breathing treatment was given without an obvious indication in the history, exam or assessment sections.
- 11. On many of the visits, the physical examination documented is inadequate in relation to the stated symptoms or diagnosis.
- B. Respondent's failure to maintain and monitor a growth chart for patient S.V. represents an extreme departure from the generally accepted pediatric standards of care.
- C. Respondent's intentional modifications to the patient's medical chart without appropriately initialing and dating each modification represents an extreme departure from the generally accepted standards of medical care. Respondent's conduct

1	followed being advised by Dr. H.W. that a lawsuit had been filed by the parents of S.V.,
2	and that Respondent was also a named defendant.
3	SECOND CAUSE FOR DISCIPLINARY ACTION
4	(Incompetence)
5	12. Respondent has further subjected his Physician's and Surgeon's Certificate
6	No. G 18418 to disciplinary action under sections 2227 and 2234(d) of the Code, in that his
7	medical care to patient S.V. was incompetent as set forth in paragraphs 10 and 11, which are
8	hereby incorporated by reference in their entirety as if fully set forth herein.
9	THIRD CAUSE FOR DISCIPLINARY ACTION
10	(Repeated Negligent Acts)
11	13. Respondent has further subjected his Physician's and Surgeon's Certificate
12	No. G 18418 to disciplinary action under sections 2227 and 2234(c) of the Code, in that he has
13	committed repeated negligent acts in his care and treatment of patient S.V. including, but not
14	limited to, the following:
15	A. Paragraphs 10 and 11 are hereby incorporated by reference in their
16	entirety as if fully set forth herein.
17	THIRD CAUSE FOR DISCIPLINARY ACTION
18	(Failure to Maintain Adequate and Accurate Medical Records)
19	14. Respondent has further subjected his Physician's and Surgeon's Certificate
20	No. G 18418 to disciplinary action under section 2266 of the Code, in that he has failed to
21	maintain adequate and accurate medical records for patient S.V. as set forth in paragraphs 10 and
22	11 which are hereby incorporated by reference in their entirety as if fully set forth herein.
23	FOURTH CAUSE FOR DISCIPLINARY ACTION
24	(Dishonesty)
25	15. Respondent has further subjected his Physician's and Surgeon's Certificate
26	No. G 18418 to disciplinary action under section 2234(e) of the Code, in that he has been
27	dishonest by intentionally modifying the medical records of patient S.V. without appropriately
28	initialing and dating each modification. Respondent's conduct followed being advised by Dr.

1	H.W. that a medical malpractice lawsuit had been filed by the parents of S.V., and that
2	Respondent was also a named defendant in this action.
3	ADDITIONAL DISCIPLINARY CONSIDERATIONS
4	16. Respondent has been the subject of prior disciplinary action by the
5	Medical Board of California and is currently on probation with the Board. His disciplinary
6	history is as follows:
7	On or about October 24, 2003, an Accusation was filed against Respondent. On
8	or about January 16, 2004, a Decision became effective which read: "Revoked, stayed,
9	three years probation with terms and conditions."
10	<u>PRAYER</u>
11	WHEREFORE, Complainant requests that a hearing be held on the matters
12	alleged herein, and that following the hearing, the Division of Medical Quality, Medical Board of
13	California, issue its Decision and Order:
14	1. Revoking or suspending Physician's and Surgeon's Certificate No.
15	G 18418, heretofore issued by the Board to NEIL HOLLANDER, M.D.;
16	2. Revoking, suspending or denying Respondent's approval authority
17	to supervise physician's assistants pursuant to Code section 3527;
18	3. Ordering Respondent to pay the Board the reasonable costs of the
19	investigation and enforcement of this case, and, if placed on probation, the costs
20	of probation monitoring; and
21	4. Taking such other and further action as the Board deems necessary
22	and proper.
23	DATED: July 11, 2005
24	DAVID T. THORNTON
25	Executive Director Medical Board of California
26	Department of Consumer Affairs State of California
27	Complainant
28	Hollander Accusation / DKB